

# Housing Assistance Payments Contract Amendment Notice

Section 8 Tenant-Based Assistance  
Rental Voucher Program

Tenant ID 1407

The Housing Assistance Payments Contract (Contract) entered into between the Owner, Bushnell RRH, LTD and the PHA dated 03/23/2011 on behalf of the Tenant, Avian Smith for the dwelling unit located at 200 Jumper Dr. Apt F-3 Bushnell, FL 33513 is amended effective 07/01/2011 as follows:

**Reason For Amendment:** Interim Redetermination as provided for in the Contract:

## Family Members

Germaine Harris Jr.

## Unit Size

2 Bedroom(s)

## Adjustment in Payments

	<u>From</u>	<u>To</u>
PHA to Owner	<u>\$237.00</u>	<u>\$363.00</u>
Tenant to Owner	<u>\$278.00</u>	<u>\$152.00</u>
Total Contract rent	<u>\$515.00</u>	<u>\$515.00</u>
Utility Reimbursement	<u>\$0.00</u>	<u>\$0.00</u>

This Amendment is presented to you in accordance with the terms and conditions of the Contract, and shall be attached and made part of the appropriate amended Contract. All other covenants, items, and conditions of the original Contract remain the same.

## Signature

Housing Agency

Sumter County Housing Development

Print or Type Name of HA

Signature

Date

Owner

Bushnell RRH, LTD

Print or Type Name of Owner

Signature

Print or Type Name and Title of Signatory

Date

# Housing Assistance Payments Contract Amendment Notice

## Section 8 Tenant-Based Assistance Rental Voucher Program

Tenant ID 1130

The Housing Assistance Payments Contract (Contract) entered into between the Owner, Ernie Massey and the PHA dated 08/01/2008 on behalf of the Tenant, Molly Hilbert for the dwelling unit located at 521 CR 226 Wildwood, FL 34785 is amended effective 08/01/2011 as follows:

**Reason For Amendment:** Annual Reexamination as provided for in the Contract:

### Family Members

Jaquard Cuyler  
La'shanequa Cooper  
Chimeshia Thomas

### Unit Size

3 Bedroom(s)

### Adjustment in Payments

	<u>From</u>	<u>To</u>
PHA to Owner	<u>\$715.00</u>	<u>\$715.00</u>
Tenant to Owner	<u>\$0.00</u>	<u>\$0.00</u>
Total Contract rent	<u>\$715.00</u>	<u>\$715.00</u>
Utility Reimbursement	<u>\$90.00</u>	<u>\$90.00</u>

This Amendment is presented to you in accordance with the terms and conditions of the Contract, and shall be attached and made part of the appropriate amended Contract. All other covenants, items, and conditions of the original Contract remain the same.

### Signature

#### Housing Agency

Sumter County Housing Development

Print or Type Name of HA

Signature

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date

#### Owner

Ernie Massey

Print or Type Name of Owner

Signature

\_\_\_\_\_  
Print or Type Name and Title of Signatory

Date

# Housing Assistance Payments Contract Amendment Notice

## Section 8 Tenant-Based Assistance Rental Voucher Program

Tenant ID 20071

The Housing Assistance Payments Contract (Contract) entered into between the Owner, Connie Lewis and the PHA dated 07/01/2009 on behalf of the Tenant, Ebony McMullen for the dwelling unit located at 10431 SW 60th Terrace Bushnell, FL 33513 is amended effective 07/01/2011 as follows:

**Reason For Amendment:** Annual Reexamination as provided for in the Contract:

### Family Members

Champion Z. Whitaker  
James Laskey Jr  
Ja'Niyah Laskey  
Jamesha Laskey

### Unit Size

3 Bedroom(s)

### Adjustment in Payments

	<u>From</u>	<u>To</u>
PHA to Owner	<u>\$41.00</u>	<u>\$218.00</u>
Tenant to Owner	<u>\$709.00</u>	<u>\$532.00</u>
Total Contract rent	<u>\$750.00</u>	<u>\$750.00</u>
Utility Reimbursement	<u>\$0.00</u>	<u>\$0.00</u>

This Amendment is presented to you in accordance with the terms and conditions of the Contract, and shall be attached and made part of the appropriate amended Contract. All other covenants, items, and conditions of the original Contract remain the same.

### Signature

Housing Agency

Sumter County Housing Development

Print or Type Name of HA

Signature

Date

Owner

Connie Lewis

Print or Type Name of Owner

Signature

Print or Type Name and Title of Signatory

Date

# Housing Assistance Payments Contract Amendment Notice

## Section 8 Tenant-Based Assistance Rental Voucher Program

Tenant ID 1414

The Housing Assistance Payments Contract (Contract) entered into between the Owner, Club Wildwood and the PHA dated 03/23/2011 on behalf of the Tenant, Karie Greene for the dwelling unit located at 775 Huey Street Apt D-9 Wildwood, FL 34785 is amended effective 07/01/2011 as follows:

**Reason For Amendment:** Interim Redetermination as provided for in the Contract:

### Family Members

Rickie Greene

### Unit Size

2 Bedroom(s)

### Adjustment in Payments

	<u>From</u>	<u>To</u>
PHA to Owner	<u>\$529.00</u>	<u>\$357.00</u>
Tenant to Owner	<u>\$0.00</u>	<u>\$172.00</u>
Total Contract rent	<u>\$529.00</u>	<u>\$529.00</u>
Utility Reimbursement	<u>\$59.00</u>	<u>\$0.00</u>

This Amendment is presented to you in accordance with the terms and conditions of the Contract, and shall be attached and made part of the appropriate amended Contract. All other covenants, items, and conditions of the original Contract remain the same.

### Signature

#### Housing Agency

Sumter County Housing Development

Print or Type Name of HA

Signature

Date

#### Owner

Club Wildwood

Print or Type Name of Owner

Signature

Print or Type Name and Title of Signatory

Date

**Housing Assistance Payments Contract  
(HAP Contract)  
Section 8 Tenant-Based Assistance  
Housing Choice Voucher Program**

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

**Tenant ID 1416 port**  
Port In

**Part A of the HAP Contract: Contract Information**

(To prepare the contract, fill out all contract information in Part A.)

**1. Contents of Contract**

This HAP contract has three parts:

- Part A: Contract Information
- Part B: Body of Contract
- Part C: Tenancy Addendum

**2. Tenant**

**Lester Tew**

**3. Contract Unit**

**1081 CR 479 Apt 45  
Lake Panasoffkee, FL 33538**

**4. Household**

The following persons may reside in the unit. Other persons may not be added to the household without prior written approval of the owner and the PHA.

**Edna Caudle**

**5. Initial Lease Term**

The initial lease term begins on (mm/dd/yyyy): 07/01/2011

The initial lease term ends on (mm/dd/yyyy): 06/30/2012

**6. Initial Rent to Owner**

The initial rent to owner is: \$ 564.00 .

During the initial lease term, the owner may not raise the rent to owner.

**7. Initial Housing Assistance Payment**

The HAP contract term commences on the first day of the initial lease term. At the beginning of the HAP contract term, the amount of the housing assistance payment by the PHA to the owner is \$ 425.00 per month.

The amount of the monthly housing assistance payment by the PHA to the owner is subject to change during the HAP contract term in accordance with HUD requirements.

**8. Utilities and Appliances**

The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.

Item	Specify Fuel Type	Provided By	Paid By
Heating	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal <input type="checkbox"/> Other		
Cooking	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal <input type="checkbox"/> Other		
Water Heating	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal <input type="checkbox"/> Other		
Other Electric			
Water			
Sewer			
Trash Collection			
Air Conditioning			
Refrigerator			
Range/Microwave			
Other (specify)			

**Signatures:****Public Housing Agency****Sumter County Housing Development**

Print or Type Name of HA

Signature

Print or Type Name and Title of Signatory

Date (mm/dd/yyyy)

**Owner****Lake Panasoffkee Apartment II, LTD**

Print or Type Name of Owner

Signature

Print or Type Name and Title of Signatory

Date (mm/dd/yyyy)

**Mail Payments To:****Lake Panasoffkee Apartment II, LTD**

Name

**910 CR 482N Office**

Address

**Lake Panasoffkee, FL 33538**

City, State, ZIP

form HUD-52641 (8/2009)